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into the larynx. Coughing may fail to expel it but further inspiration may draw it still further down into the respiratory tract, where it permanently lodges. Literally hundreds of such small foreign bodies have been taken from the larynx, trachea or bronchial tubes of both adults and children, during the past few years. The first case I had in my service at the Boston City Hospital this year was a five cent piece firmly lodged in the larynx of a small child. The coin had been there for three days, and was firmly embedded in the oedema of the surrounding tissues. An X-ray photograph showed it plainly, and it was removed without great difficulty.

Foreign bodies in the respiratory tract are likely to cause septic pneumonia, though it is amazing how long they may remain there without causing distressing symptoms. Recently, while riding upon a train, a stranger with whom I was talking told me he and his wife were returning from Pittsburgh where his wife had recently undergone a marvelous operation. It seems that the lady had inhaled a large-headed pin five years before, and had little or no trouble from it until recently. The gentleman told me that the pin was removed in five pieces, and that a special instrument was devised and made to remove the head of the pin which was the last fragment to be withdrawn. This remarkable feat was performed by Dr. Chevalaer Jackson of Pittsburgh, who is acknowledged to be the leading operator in the field of bronchoscopy in this country.

WOMEN AND CANCER

Between the ages of 35 and 45 three times as many American women as men die of cancer, between the ages of 45 and 55 twice as many. Generally speaking, the excessive mortality among women is due to cancer of the breast and of the generative organs. These forms of the disease, like others, are curable by qualified treatment in the early stages.—*American Society for the Control of Cancer.*